

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 3
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) New American Jobs Fund		FEC IDENTIFICATION NUMBER ▼ C C00625533	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Mack-Sumner Communications, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016		
Mailing Address 2001 N Beauregard St Ste 420			Amount 14915.98		
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : E8D1E140EA9D5460DB5C		
Purpose of Expenditure T-Shirts		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Mack-Sumner Communications, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016		
Mailing Address 2001 N Beauregard St Ste 420			Amount 7800.00		
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : ED99A6871D2BF40A1BA2		
Purpose of Expenditure Door Hangers		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	22715.98
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Collins, Patrick, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 30 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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Full Name of Payee Mack-Sumner Communications, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016		
Mailing Address 2001 N Beauregard St Ste 420			Amount 12245.00		
City Alexandria	State VA	Zip Code 22311-1750	Transaction ID : E2893A42627F94EF8A2E		
Purpose of Expenditure Door Hangers		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC		
Calendar Year-To-Date Per Election for Office Sought		540079.18	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Printex, LLC			Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016		
Mailing Address 35C Industrial Parkway			Amount 483.32		
City Woburn	State MA	Zip Code 01801-1914	Transaction ID : E24D918AF83394FA192B		
Purpose of Expenditure Arm Band Reflectors (Estimate)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC		
Calendar Year-To-Date Per Election for Office Sought		540079.18	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12728.32
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Terra Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 29 / 2016	
Mailing Address 100 East Grand Ste 380		Amount 168950.00	
City Des Moines	State IA	Zip Code 50309-1801	Transaction ID : EA7F7266D625841489E3 Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure Field Canvass Consulting		Category/Type	
Name of Federal Candidate Clinton, Hillary, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: DC
Calendar Year-To-Date Per Election for Office Sought 540079.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY
Purpose of Expenditure		Category/Type	
Name of Federal Candidate		<input type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	168950.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	204394.30

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